



**RESPONSE UNDER 37 C.F.R. §1.116  
EXPEDITED PROCEDURE-  
EXAMINING GROUP 2128**

Docket No.: S1022.80847US00  
(PATENT)

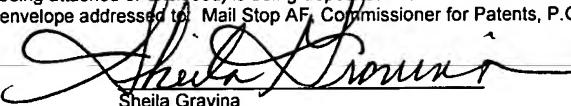
**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Nicholas Pavey  
Serial No.: 10/074265  
Confirmation No.: 5021  
Filed: February 12, 2002  
For: STATE COVERAGE TOOL  
Examiner: H. M. Jones  
Art Unit: 2128

**Certificate of Mailing Under 37 CFR 1.8(a)**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: May 15, 2006



Sheila Gravina

**AMENDMENT AFTER FINAL ACTION UNDER 37 C.F.R. 1.116**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated March 15, 2006, finally rejecting claims 1-19, please consider the following:

Amendments to the Claims are reflected in the **Listing of Claims** which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.



AF  
SPW

## AMENDMENT TRANSMITTAL LETTER

Docket No.  
S1022.80847US00

Application No.  
10/074265-Conf. #5021

Filing Date  
February 12, 2002

Examiner  
H. M. Jones

Art Unit  
2128

Applicant(s): Nicholas Pavey

Invention: STATE COVERAGE TOOL

### TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

#### CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 19 =		x	
Independent Claims	3	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00

Large Entity

Small Entity

No additional fee is required for this amendment.

Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge and credit Deposit Account No. 23/2825  
as described below. A duplicate copy of this sheet is enclosed.

Credit any overpayment.

Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Dated: May 15, 2006

Daniel P. McLoughlin

Attorney/Agent Reg. No.: 46,066

WOLF, GREENFIELD & SACKS, P.C.

Federal Reserve Plaza

600 Atlantic Avenue

Boston, Massachusetts 02210-2206

(617) 646-8227

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Dated: May 15, 2006

Signature:  (Sheila Gravina)